

CANADIAN

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Welfare

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Welfare and Preparedness

One of the tasks of welfare workers in 1951 is to reassess individual and family needs in the changing circumstances of a defence economy and a semi-mobilized state. The necessity for this is not yet clearly recognized but will become so increasingly if accelerated military preparations continue.

Some of the immediate effects of present trends, ironically enough, are likely to be good. Work will be plentiful, with unemployment cut to a minimum: older people and those with physical handicaps will hold a footing in the labour market; family income will be assured.

Other effects will be less desirable. Restlessness, coupled with the lure of high wages, will induce youngsters to leave school before their time; and housewives with small children will be tempted similarly to jobs in industry when for social reasons they should remain at home, although some of them who need the extra income for essentials may have no alternative. Further, of course, many workers will move from one community to another, and social problems will arise from family separations, congested housing and the lack of leisure-time and other facilities.

In regard to family income there are likely to be some gains for the lower economic groups. Whether or not wage controls are imposed, the money income of many families will increase, as it did after 1939, because of overtime pay and the fact that more members of the family will be in employment. On the other hand there will be large numbers of families and individuals whose money income will remain unchanged and whose purchasing power will drop: old people on pensions, widows similarly, and many salaried workers. All categories, directly or indirectly, will have to reckon with higher taxes of which we have had only a foretaste up to the moment.

Account must also be taken of the fact that we are beginning to build up our armed forces. How quickly this will proceed and how far it will go is anybody's guess. Quite possibly before long we may reach the stage where young people as part of their normal training will be required to serve some time in the armed forces. Should this happen it will obviously modify the life cycle of the oncoming generation with implications for family life that cannot lightly be dismissed. Even now, among men already enlisted and their dependents, needs are beginning to appear for which adequate facilities and services have yet to be provided.

Finally there is the question of civil defence, which may be expected shortly to receive more serious attention. As Professor John Morgan

pointed out in a recent issue of *CANADIAN WELFARE*, basing his remarks on Richard Titmuss' brilliant analysis of England's experience in the last war, welfare services and a sufficient supply of trained social workers are indispensable elements in any effective civil defence program. But these take time to develop. It is important, therefore, that we recognize the need for them early and begin to plan for them at once.

The above analysis would seem to cast doubt on the views of those who believe the emerging situation is such that we must postpone indefinitely any further development of the nation's welfare services. Rather, events as they unfold are likely to reveal social needs that were less apparent in more ordinary times and to compel action to meet them. Two objectives appear from this for welfare leaders. One is to be alert to the importance of establishing priorities among new measures to be developed. Another is to see that whatever welfare provisions are developed under the stress of the preparedness program shall not be merely improvised on an emergency basis, but so designed as to fit into the permanent structure of our social security system.

Disability Pensions 65-69 Age Group

Premier Frost's recent statement in the Provincial Legislature that the Ontario Government preferred a disability test to a means test pension for dealing with the needs of persons 65 to 69 reflects sound thinking and would, we believe, find support in a number of other provinces. It is to be hoped the idea will receive careful consideration by the federal government before the new legislation providing for old age pensions is introduced. As Mr. Frost points out, the arguments against the means test for persons over 70, namely that it is demoralizing and that it discourages thrift and production, apply equally to the group under 70.

Undoubtedly the Parliamentary Committee in recommending as it did was influenced by the technical difficulty of determining disability, but while this difficulty may be real, it is not in our judgment insuperable. As pointed out in the brief submitted by the Canadian Welfare Council, proof of disability is already required for claims under workmen's compensation and for military pensions. Besides, a number of countries are now operating invalid or disability programs. In making disability the test for old age pensions, with a large number of applicants, it may be necessary at first to define somewhat arbitrarily the conditions which will enable a person to qualify. Later, as experience grows, backed by research in geriatrics, it would be possible to broaden the definition.

Social Security — Too Much of a Good Thing?

By DR. GEORGE F. DAVIDSON,
Deputy Minister of National Welfare

Part of the Hewitt Bostock Memorial lecture entitled
"Issues in Social Security" delivered at the University
of British Columbia, January 11, 1951.



I HAVE no doubt that, on the face of it at least, this is the major issue today in the social security field in Canada: How much can Canadians *afford* to spend on social security? And as a subordinate, though not less important part of this same question: How much *should* Canadians spend in this field? This is a question which I am sure is of major concern to all governments today—federal, provincial and municipal—as they see the continually mounting costs of the programs that have already been inaugurated and the continuing demand from every side for new and not less important ventures into such fields as health insurance, disability programs and the like. I need not add that this is also, I am sure, a cause of major anxiety to leaders in other fields, such as education, who are acutely conscious of their own needs for greatly enlarged measures of public support and are fearful that these may be lost from sight or side-tracked in the face of the mounting costs of social security and the ever-continuing public demand for more

and more expenditures in this field.

I have said that the question which I have posed is really a two-fold one: How much can Canadians *afford* to spend on social security; and how much *should* we spend in this field? The first of these questions relates essentially to our physical and fiscal capacity, and I propose to deal with it first and then to return to the other aspect of this question. I warn you in advance that you cannot expect from me any final answers to these questions. I suspect, in fact, that no one in this country, or, in fact, in any other country, can give final and definitive answers to questions such as these which cannot, in the last analysis, be reduced to exact mathematical terms.

Canada's Social Security Expenditure

Let us look then at the first of these questions: How much can Canada *afford* to spend on social security measures? I have already given some indication of the amount which we are presently spending—somewhere between \$1 billion and \$1¼ billion annually at the present time. Can Canada

afford such sums of money in the interests of better health and social security? The answer to this seems pretty obvious. The fact is that at this present time we are carrying this burden through our public treasuries and through our private philanthropies, and we are doing so without noticeable strain, though all of us would admit that the burden of our taxation, due in large measure to these services, is much heavier than it was before the war, and that the cost of these services is in fact reflecting itself in higher wage and production costs. This, in turn, affects our cost-of-living and in this way places a severe strain on the limited incomes of many thousands of Canadian families. Despite this fact, I think no one can deny that the evidence is plain for anyone to see that Canada today is not spending more than she can physically afford on the provision of health and social security measures.

Ratio of Social Security Costs to National Income

But the fact that this is true today does not mean that it would be true of all other periods in our Canadian history. For example, Canada could certainly not have afforded in the depression years of the 1930's to underwrite a social security bill of over \$1 billion annually. At that time our national income had shrunk to something like \$4 billion. An expenditure of the order of \$1 billion annually on social security measures would have represented something of the order of 25 per cent of the total

income of the entire population. This would have clearly meant an intolerable burden on the economy of the nation and of the families which make up the nation. Why, then, is it that a burden which today is carried without undue strain would have been found so intolerable only a relatively few years ago?

The answer, of course, lies in the fact that the economic structure of our country, which now supports with such relative ease current social security burdens, is a vastly different one from that which was tottering on the brink of disaster in the early 1930's. Our national income today is not \$4 billion annually, but rather of the order of \$14 billion annually. The burden of our social security program represents, therefore, something less than 10 per cent of our national income. Perhaps the most remarkable feature of the history of our country during this past two decades has been the remarkable transformation in the productive capacity of the country which has resulted in this tremendous growth in our national income.

A More Productive Canada

I cannot help recalling at this point that when Leonard Marsh wrote his epoch-making report on social security in Canada in 1943, he based his plans, which then were considered rather ambitious plans, on the assumption that Canada after the war would be able to maintain a national income in the neighbourhood of \$8 billion annually. On the basis of this, he outlined a series of social

security proposals, the total cost of which he estimated might run as high as \$900 million a year. There were many people at that time who considered the Marsh proposals, and in particular his assumptions as to future national income levels, as being completely unrealistic. Such wartime levels, they said, of national income could never, of course, be maintained in the post-war period.

Well, the Leonard Marsh critics were proven right, but not in the way they expected. His estimates of national income in the post-war period *were* unrealistic, for today they are at least 75 per cent higher than the calculations which he assumed for the purposes of his proposals back in 1943. It is not unlikely that we will see within the coming year or the year thereafter a national income figure of \$16 billion or more.

This underlying economic picture has to be kept in mind in any attempt to assess the real cost of social security programs in any given year, and even more in any attempt to assess the limits of our fiscal capacity in the support of broadened social security measures. Already we are spending on our present, still incomplete social security program larger sums of money than those which Leonard Marsh estimated as necessary for a complete program in 1943. Our ability to maintain our present program — our ability to broaden and to expand it into the complete array of social security measures which is the constant objective of socially-minded Canadians — will

depend not on preconceived ideas that any of us may have as to the capacity of our country to bear these expenditures, but rather on our ability to maintain a constantly expanding, increasingly prosperous economy to serve as the foundation for our country's future growth.

No one who reflects upon the record of our nation's rapid progress in the last 20 years, or on the tremendous expansion even now taking place in terms of newly discovered wealth and resources all over this country, can have any serious doubt that in the second half of this century Canada will continue to grow in population, in productivity, and in her capacity to maintain, if she so desires, an even larger and more generous measure of social security for the people who make up our nation.

The Moral and Philosophical Principle

There are, of course, those who look upon these impressive sums that are now being spent in the fields of health and social security from a different point of view. They view the problem not as one of economic potential or fiscal capacity, but rather as a moral and philosophical one; and this brings us to the second half of the question I have posed. How much *should* Canada be spending on her social security program? Granted that present spending can be maintained or even increased without undue strain on the economic capacity of our country, is it a good thing for the people of Canada that they should be given

such a measure of protection as is involved in a complete and comprehensive social security program? Is all this social security good for the Canadian people? Is it perhaps doing something to them in the way of sapping their moral fibre and making them less self-reliant, more dependent upon the community and the state than is good for them? Can people perhaps have too much social security? Are we running the danger now in Canada of providing too much in the way of health and welfare services for the genuine good of our people?

Well, once again the answer to this must, I think, be an indefinite one because it depends inevitably on the attitude and point of view of the person who asks or answers such a question. Obviously it is possible to go too far in the provision of social security measures. I am not suggesting for a moment that Canada or any other country has yet done this. In fact, I say without any hesitation that in our own country we have still a good way to go before we run the risk of justifying any such apprehension. But it goes without saying that it is possible to have too much of a good thing, and that a point might well be reached where the level and the extent of social security benefits might be such as to diminish incentive to work, and to lead to an undesirable loss of initiative and sense of self-reliance among wide sections of the population.

Fears Versus Facts

I can only say that, based on such personal observations as I have been able to make during my years of activity among the Canadian people, I have seen no evidences of this growing dependency which so many good people fear as the inevitable companion of a broader measure of social welfare services. I have heard, of course, from time to time the stories of persons who prefer to remain on unemployment insurance rather than take a job. I have also heard the stories of the heads of families who prefer to remain at home and live off their family allowances rather than go into the woods to work in the wintertime. I have heard the stories of able-bodied sons and daughters living off their aged parents' old age pension cheques. Tales such as these find their way into print or into public gossip periodically and are passed along from mouth to mouth with amazing rapidity, particularly among those sections of the populations which are anxious to discredit our social security programs.

I confess that I do not pay much attention to these old wives' tales. I have no doubt that if you were to scour Canada from one end to the other, you could indeed find individual cases that would fit, to some extent at least, into the framework of the picture which these stories paint. We have such people in Canada: we have always had them, and I am afraid that I am a pessimist enough to believe that we will always have them. But to suggest that this is the

typical picture of all Canadian life, or all Canadian attitudes, is to insult our average Canadian workman and his family in the most gratuitous and barefaced fashion.

While pictures such as this are being painted of the demoralizing effects of our social security program, production in Canada is mounting higher and higher. The labour force in Canada today is the highest in our country's history. Employment in these war and post-war years which coincide with these enlarged measures of social security has been at its peak. I cannot for my part reconcile this unprecedented level of economic activity, this full employment picture and the highest level of productivity that our country has ever known, with the other picture of a slothful nation, grown accustomed to dependency and indolence, and leaning on the all-benevolent state for its monthly allotment from the social security fund.

Social Security and Independence

To me the answer to the question "How much social security can or should we have in Canada?" lies in the last analysis in the hands of the people of Canada themselves. We are the ones who will finally have to decide, in the light of our own resources and our attitudes, how far we want our governments to go in matters such as this. Among us are those, of course, who fear that the provision of security against the hazards of health and idleness and sickness, disability and death, will sap the

vitality of our Canadian population, will make them chronic dependents, will make us a nation of leaners, all of us looking to the government rather than standing on our own feet. Such people believe that poverty is a powerful goad, spurring men on to greater achievements; that it puts iron into a man's soul and makes it possible for him to accomplish things that otherwise would not be possible. There have, of course, been notable examples where poverty has done just that; but there have been examples much more numerous where poverty has crushed and destroyed, where poverty has degraded man and made him more dependent, has struck his family down in sickness that left its mark for an entire generation or more.

When we look to the experience of other countries, such as New Zealand and Britain, which have had a large measure of social security for over a generation now, we fail to see any signs of a breakdown in that spirit of sturdy independence which has been so characteristic of the British people down through the centuries. Did we see the British soldiers at Dunkirk, El Alamein or Arnheim leaning on their shovels? We see no signs that the people of the United States or Australia have lost their initiative and ability to withstand punishment, their desire to stand on their own feet, as a result of the inauguration of comprehensive health and welfare measures. Korea is the latest proof of that.

If this is true of the people of

other countries, we too in Canada can surely provide a measure of relief from poverty for our people without weakening in any way the quality of sturdy independence that we have regarded as typically Canadian since the time our country was founded. The provision of security need not in any way create dependence or dependent attitudes; instead it can and does create a solid foundation, on the basis of which decent family life can be built, on the basis of which thousands of Canadian fathers, mothers and children will be enabled to reach out to other opportunities for growth and development which they could not otherwise have known.

Luxury, Charity, Compensating Mechanism?

This issue of social security boils down in the last analysis to our own collective philosophy, our own attitude as a democratic people to the role of our social welfare services in our society. This society of ours is being tested now as it has never been tested before. What we will be going through as a people during these next few years will tax our full resources and potential as they have never been taxed before. If social security is regarded by us as a luxury, as mere frosting on the cake, then I say here and now that we will find in these next few years that we cannot afford this so-called luxury of social security, we cannot afford so much frosting on our cake. But is our social security a luxury: do the Canadian people so regard it?

Do we consider it as based solely

on the humanitarian view that distress should be relieved, that the downtrodden should be lifted up, and that the personal misfortunes of the less-well-equipped members of our society should become the concern of the all-compassionate state? Or do we perhaps consider that our social security program is an inevitable part of the price we pay for our highly impersonal, highly industrial society—that it is, in effect, a compensating mechanism, designed to take account of the fact that in the highly urbanized, highly industrialized society in which we live, some people get pushed around, some people get hurt, and that it is the job of society to pay for that?

A Function of an Interdependent Society

Those are both two perfectly understandable, perfectly justifiable views as to the function and purpose of social security in our democratic society. But I like to think of our social security programs in a slightly different light. I like to think of them not merely as the badge of our compassion, nor as a necessary cost of doing business, but as the purposeful symbol of our democratic way of life itself, a recognition of our common brotherhood, our common interdependence. I cannot regard the function of our social security program as being merely humanitarian or merely utilitarian, and I am not alone in my view. Listen to this:

"I object to having this spirit of personal civil responsibility to the State and to the individual described

as humanitarian. It is far more than that. It is the recognition that our civilization cannot endure unless we, as individuals, realize our personal responsibility to and dependence on the rest of the world. For it is literally true that the 'self-supporting' man or woman has become as extinct as the man of the stone age. Without the help of thousands of others, any one of us would die, naked and starved. Consider the bread upon our table, the clothes upon our backs, and luxuries that make life pleasant; how many men worked in sunlit fields, in dark mines, in the fierce heat of molten metal, and among the looms and wheels of countless factories in order to create them for our use and enjoyment."

These are not my words. These

are the words which expressed the personal philosophy and point of view of one of the greatest figures of our 20th century, Franklin D. Roosevelt. These words were spoken not in recent years, but in Roosevelt's First Inaugural Address as Governor of New York in January, 1929.

If we can accept this view of the role of our social security programs in a democratic society, we will see them not only as an essential part of our way of life, but as a *very important weapon in the arsenal of true democracy* as it faces the most crucial test of all history.

Rehabilitation Conference

By EDWARD DUNLOP,

Executive Director of the Canadian Arthritis and Rheumatism Society

THE national conference on the Rehabilitation of the Handicapped was held at the King Edward Hotel, Toronto, on February 1, 2 and 3. Called by the Federal Minister of Labour in co-operation with the Ministers of National Health and Welfare and of Veterans' Affairs, the Conference may well prove an important advance towards providing truly adequate rehabilitation services for physically and mentally impaired Canadians.

Nearly 200 delegates and observers attended, representing the health, welfare, education and labour departments of our eleven

governments, workmen's compensation boards, employers and employee associations, national voluntary agencies, the professions, and organizations of handicapped persons, and individuals with special knowledge. The very nature of the delegation did much to impress all present with the broad range of services, jurisdictions, interests and skills which would form the warp and woof of a nation-wide rehabilitation programme. Equally evident was the encouraging optimism of the delegates, and the strong official, professional and lay interest which they reflected.

On several occasions it was

pointed out that this was a conference at the technical, rather than the political or policy, level, and the agenda was designed to focus attention upon the various phases of the rehabilitation process. Inevitably, policy received a good deal of attention in the plenary sessions and the discussions of working committees on medical rehabilitation and vocational guidance, training and placement.

The absence of concrete proposals, the agenda's emphasis on matters of technique rather than policy, and the very considerable time devoted to free discussion indicated that the federal government viewed the Conference primarily as a forum for the expression of views, from which it could ascertain the general feeling of the technicians and estimate the climate of public opinion. Although some may have considered this approach unduly cautious, it was reasonable and possibly desirable in conceiving a new service programme, the success of which will depend upon co-operation between the federal, provincial and municipal governments, voluntary agencies and professional groups.

The final session debated resolutions presented by the working committees. The first affirmed the belief of the delegates in the desirability of a Canada-wide program of rehabilitation; some of the basic principles were then enunciated, and machinery through which the federal government should take the next steps was described.

The unquestioned acceptance of the need for a Canadian program is a tribute to the pioneer work carried out on behalf of various categories of the disabled by many governmental and voluntary agencies. Although the financial implications were indicated only obliquely in the resolutions, it was recognized that the leadership of the federal government must be combined with the resources of all other organizations concerned.

The Conference recommended that the federal government set up an advisory committee, broadly representative of provincial governments, voluntary agencies and the professions, to implement its resolution and work towards a national program. This resolution was an expression of the sincere desire that this should not be "just another conference", and that definite action should be taken to develop a comprehensive nationwide program of rehabilitation for the disabled.

The feeling of the delegates that the first Canadian Conference on the Rehabilitation of the Handicapped had accomplished something worthwhile seemed confirmed in the closing remarks of the Honourable Milton F. Gregg, V.C., Minister of Labour, who said that he would join with his colleagues the Ministers of Health and Veterans' Affairs as soon as possible to study those sections of the resolution which concerned the federal jurisdiction, and consider the further steps which should be taken.



Let's Stop the Fourth World War Too

From editorial in MACLEAN'S MAGAZINE, January 15, 1951

"... As this is written there is still some prospect of a reprieve from war. If we get that reprieve it is essential that we make use of it. We must make use of it partly to shore up our military weaknesses; to do anything less would be insane.

"But purely military and defensive measures can never give us anything more than an extension of the reprieve. We can expect no pardon from war until we come

to grips with the root causes of war, which are not military.

"We must somehow and soon begin to fight the causes of war with the same valor and selflessness with which we fight the wars themselves. As long as three fourths of the human race live in poverty and ignorance—and as long as we who are better off do little more than send them armies to help fight an ism which they have scant will or energy to fight

—peace will not be the natural state of man. Peace will merely be a series of incidental silences spacing out the crescendoing roar of doom.

"These silences are too short and precious to be wasted. Already the current silence, barely five years old, appears to be nearing its end. We might just be able to salvage something from its wastage if we made a last college try in the little time that's left. Well, how?

"We in Canada, who have wasted those five years as flagrantly as any nation, could begin by recasting our attitude to immigration. We could and should open the borders of this bountiful and sparsely settled land to the agonized and dispossessed of Europe and invite them to enter not in thousands but in millions. In determining who shall be allowed to enter we could and should place less emphasis on what they can do for us and more emphasis on what we can do for them.

"For every dollar we must spend to train and maintain our special Korea brigade we could spend another dollar to train and maintain a special brigade of several thousand doctors. We could send these doctors, at our expense, to fight disease in the parts of the world where many millions live

and die without knowing a single day of freedom from disease.

"For every shell and bomb we shall create if there is a Third World War we could create with greater ultimate profit to ourselves a meal for the mouth of a starving child.

"According to the standards of international generosity which have existed up to now, we of the "have" races have already been more than generous to the "have-not" races. But more-than-ever-before is not enough to challenge the wild and specious promises of our enemies. As China, Korea and Malaya ought to have shown us, a promise—any promise—can look good to a man who's sick or hungry. If we chose to do so, we of the democratic world could make far more beautiful promises than our enemies can make. More important, we have the means to deliver on our promises and our enemies have neither the means nor the morality to deliver on theirs.

"If, in the shadow of World War Three, we cannot find the heart or the imagination to make the decisions which these facts cry out that we must make, then nothing will be settled by victory or by defeat. And our sons will face the same decisions in the shadow of World War Four."

EGYPT SETS UP PROGRAM FOR SOCIAL SECURITY

IN January Egypt inaugurated its new \$18,000,000 national social security program, believed the first plan of its kind in the Arab world. The program covers the aged, physically disabled and unemployed who have no other source of help. By western standards the \$6 monthly payment planned is comparatively small. But per capita income in Egypt is not large.

Mid-Winter Meeting of the Public

Welfare Division

A Layman's Impressions

By ALEX. R. CAMERON

MY ENTRANCE to the conference room in Regina last January could not have been timed worse. I was just sliding into my seat when I heard Mr. Jack White, chairman of the public welfare division, announce that it had been decided to exclude the press from all business sessions. Now I am a member of the press in moderately good standing. I am also a member of the Saskatoon Welfare Council, and the executive of the Chest and Council had only a day or so before magnanimously named me as an official delegate to the conference. I debated my position for all of sixty seconds. And then I did just what I expect you would have done. I stayed: it was as an agency delegate that I came to the meeting, regardless of my press connections. [The Chairman and the Division agreed to this decision. Mr. Cameron was a delegate at meeting and not a press reporter.—Ed.]

I raise this matter not in defence of freedom of the press or of its right to attend any meeting it desires, though I think that is something welfare workers ought to think about because I occasionally detect a feeling among them that they regard a free press

as a place where they can get favourable publicity for their good works without paying for it, rather than a forum in which their works may be examined impartially and sometimes critically. I raise this question not in defence of freedom of the press but because it leads me to the interpretation of social work. Social work interpretation is never easy. Except in a few fields, the interpreter is trying to explain intangibles. There are few emotional channels directly into the hearts of the uninitiated. Public social work is even more difficult. The worker in this field is already suspect because he is a civil servant, maybe even "a bureaucrat". And because it is difficult, the problem, in my view, is often dodged.

If you have followed me so far, you will see why I think it was unfortunate that the press was excluded from the Regina conference. In making his announcement about the press, the chairman explained that an earlier conference had run into trouble because the remarks of some public officials had been printed, causing ministerial embarrassment: if the press was present, discussion might not be so frank. I recognize the difficulty in a conference where responsible civil servants are dis-



Left to right: Conrad Saint-Amant, Director, Public Welfare Department, City Hall, Montreal; Miss Robena Morris, Director, Welfare Services, Department of Public Welfare, Toronto; Ald. Joseph Wilkie, representing Saskatchewan urban municipalities; T. T. Hill, Assistant Administrator, Social Service Department, Vancouver.

cussing new fields of work about which their governments have not made statements of policy, and I have no mandate to pass judgment on the wisdom of the Division's decision. I only regret that newspaper and radio men were not allowed to see the public welfare people sitting down together to reason calmly about how best to make the limited resources of the community spread as far as they could. It was a good honest picture of a group of responsible, earnest people trying to hammer out a workmanlike way of going about a particular job. I couldn't detect a "power-mad bureaucrat" in the lot.

While I am on this topic of interpretation, I should say a word

about Miss Marie Parr's notable contribution to the conference. Miss Parr, who is director of the Child Welfare Branch in Saskatchewan, spoke on citizen participation in public welfare programs. It was her thesis that citizens are eager to co-operate,—that they want to have a hand in planning programs and observing operations. She suggested that this was so, in part, because the public fears the development of bureaucracy in government social work. "Advisory boards," she said, "should become part of our life".

The Canadian Welfare Council studies presented to the conference recognized the same principle and made room for citizen advisory boards in the programs sketched

out. This, it seems to me, is all to the good. Citizen boards should provide an avenue for interpretation of a government program to the community. But it strikes me that a good citizen board will want to do more than serve as a transmission belt for government policy. How to reconcile ministerial responsibility with a system that permits citizen boards to participate in policy decisions is beyond me. But I am also sure it is something we ought to be working on.

Much of the time of the conference was spent in discussion of two reports submitted by committees of the Canadian Welfare Council. One was a program to co-

ordinate and expand work being done in Canada on behalf of disabled persons. The other was a new approach to public assistance programs. Most readers of *CANADIAN WELFARE* will be familiar with these studies or will have an opportunity to read them.*

Both programs entail the cooperation of our three levels of government in Canada—municipal, provincial and federal. The study on the rehabilitation of the disabled brought in also the work of volunteer agencies. It interested me to note the attempts made to

*Copies of these reports are available on request.



Left to right: J. S. White, Deputy Minister, Department of Social Welfare and Rehabilitation, Regina; Dr. George F. Davidson, Deputy Minister of Welfare, Department of National Health and Welfare, Ottawa; J. H. Creighton, Director, Old Age Pensions Branch, Vancouver; F. W. Rowe, Deputy Minister, Department of Public Welfare, St. John's, Newfoundland; H. S. Farquhar, Director, Old Age Pensions and Blind Pensions, Halifax; R. E. G. Davis, Executive Director, The Canadian Welfare Council, Ottawa; B. W. Heise, Deputy Minister, Department of Public Welfare, Toronto.

reconcile these varying interests within the framework of a single program. This is often a problem of great delicacy in a federal system, for it does not always happen that the level of government which ought in theory to be able to do the best job has the means to perform it. We must develop, therefore, a fluid sort of system which will blend the best features of local administration with ability to finance programs in times of stress.

The public assistance program offered a twofold approach to the problem. There was first a division of responsibility appropriate to the nature of the job. For example, it was suggested that the federal authority assume responsibility for assistance to employables and that the provinces and the municipalities assume responsibility for unemployables. This simple division raises other problems in turn. So far as the federal government can meet its share of the problem through unemployment insurance (expanded to take in many more groups than it does now) no serious problem arises. But if it also assumes responsibility for uninsured unemployed, its machinery is not adequate to the job: much of the administrative side of the task must fall to the provinces and the municipalities.

At this point the Committee's suggestion was that the federal government should purchase service from the province and the municipality, making just enough contribution to administration costs to earn a voice in saying

something about the quality of the services purchased. The federal government ought to supply the major part of the actual assistance given to the individual, leaving just enough of the cost to be borne by the province and the municipality to discourage irresponsibility in granting aid.

This curious system of checks and balances combined with the principle of grants-in-aid strikes me as having more to recommend it than the simple percentage grant proposed for the rehabilitation program. I always have an uneasy feeling that a simple grants scheme is an easy expedient advanced by someone in a hurry to get a program started and not greatly concerned about the political problems of a federal state. Even to dignify such an approach by calling it a "partnership" does not always reassure me. But then, I have given in the last ten years many emotional hostages to the principle of fiscal need as worked out in the Rowell-Sirois report. When a program begins to short-circuit what to me is a basic principle of sound federalism, my doubts rise fast. These last few years we have seen so many grants-in-aid schemes giving identical help to all parts of Canada without regard to their ability to contribute that I am beginning to wonder if we will ever face up to the real problem. I suspect that this problem does not seem nearly so pressing to the people of Ottawa, Toronto and Montreal as it does to those of us who happen to live

in the Prairies or the Maritimes. At any rate, I was encouraged to notice in the public assistance report this sentence: "This payment (by the federal government to the provinces for aid to unemployed employables) would . . . take into consideration the equalization of the financial burden, as between provinces; and as between local authorities within one province."*

The nature of the meeting made it easy for everyone to agree that we need expanded welfare services in Canada. It was easy to agree, too, that we should have better administrative techniques. But I wonder, sometimes, if the eyes of the meeting were not too firmly fixed on the distant goal. Granted that this must occupy a leading place at any conference, should there not also be an opportunity for professionals and laymen to evaluate the work that is now

*The Division is encouraging comment on this report by groups across Canada before it makes recommendations. Interested groups should write the secretary of the Division for material.

being done, to stop and seriously ask ourselves: "How are we doing?" Maybe the answers will be so diverse as to be unproductive. But it seems to be that the question is worth asking anyway.

We hear much these days about the dangers of the welfare state and of the dangers of bureaucracy. I have no doubt there is something in them, but I think they are exaggerated. And some of our chief worriers would do well to associate even for a few days with the people who have the responsibility for making our welfare services function. I think they would find, as I did, that the civil servants in social work are thoughtful persons. They are, indeed, not much different from the ordinary run of Canadians. They have a job that offers many rewards and some frustrations and they are doing it well.

The full proceedings of the Meeting of the Public Welfare Division of the Canadian Welfare Council will be sent to all members of the Division and to delegates to the Regina meeting. Other persons will receive copies on request.

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INDIAN AFFAIRS

By MAYSIE ROGER,
Manitoba School of Social Work

From a paper presented at the meeting of the Public Welfare Division of
the Council, Regina, Jan. 9-11, 1951.

IN January, 1947, the Canadian Welfare Council and the Canadian Association of Social Workers presented a joint brief to the Special Committee of the Senate and the House of Commons to examine and make recommendations regarding the Indian Act. This Committee reported in 1948, and after two years' delay, Bill No. 267, *An Act to Amend the Indian Act*, received its first and second reading in June, 1950. The Bill was then withdrawn, and it is our understanding that a new bill will be presented at the present session. Do our recommendations of 1947 need revision in 1951?

In the joint brief, we concerned ourselves primarily with questions of social welfare. We came out strongly in favour of a program leading to full assimilation of Indians into Canadian life. We asked the Federal Government to consult with provincial authorities about the possibility of extending to the Indian population the services of provincial departments of education, health and welfare. As assimilation proceeded, we thought special services for the Indians should become progressively less necessary.

We said "the native population is being given less consideration than any other group in Canada with respect to the improvement

of social conditions". Housing conditions made the Indians of today a race of slum dwellers. The tuberculosis death rate among Indians was 579.2 per 100,000 in 1944, while among whites it was 42.2 per 100,000. The infant death rate among Indians was 108.3 per 1,000 live births; among whites, 54. Malnutrition was prevalent and we quoted from a medical survey among the Northern Manitoba Indians: "It is not unlikely that many characteristics, such as shiftlessness, indolence, improvidence and inertia, so long regarded as inherent or hereditary traits in the Indian race, may, at the root, be really the manifestations of malnutrition. Furthermore, it is probable that the Indians' great susceptibility to many diseases, paramount among which is tuberculosis, may be attributable among other causes to their high degree of malnutrition arising from lack of proper foods".

We mentioned specifically the wide open practice of prostitution in frontier communities which resulted in Indian girls becoming venereally diseased and pregnant. Juvenile delinquents were usually returned to the reserve with little attempt at treatment. Adoption of Indian children was carried out without the careful legal and social protection afforded white children.

A child, whether legitimate or illegitimate, was precluded from absorption into the maternal grandparents' home, though socially this might be most desirable. Because Indian children are wards of the Dominion Government, they did not have the benefits of provincial child protection legislation. We spoke at some length about the lack of educational opportunities for Indian children. We considered that residential schools played too large a part; they separated child and parent, home and school, and meant that parents did not benefit from having a school in the community. We did not like Indian children to be cut off from other Canadian children during their school years. Nor did we like residential schools to be used as refuges for neglected and handicapped children, orphans and children from broken homes. We did not think that adequate material assistance was provided when Indians were in need.

How far were our recommendations realized in the clauses of the Bill to amend the Indian Act? Some of our recommendations could be carried out through administrative changes; others called for legislative action by the Dominion Government.

We asked for a modernization of the Indian educational system, with the Dominion Government assuming full financial responsibility. We wanted Indian children to attend the same schools as other children in the province, and we asked the Dominion Govern-

ment to work out an agreement with the provinces to make this possible. Where this was not possible, the Dominion should build its own non-sectarian day schools, which should be educational and recreational centres for the whole community. Residential schools should be reserved for children of nomadic tribes, or for carrying out special programs. Where the government had to use schools operated under private auspices, the Dominion should pay the full cost of care.

In our recommendation that Indian children should be educated in the regular schools of the provinces, we were in agreement with the recommendation of the Parliamentary committee. The Bill provided for this education by permitting agreements between the Federal Government and the provinces, the Yukon and the Northwest Territories. The Indian Act already gave the Department power to build day schools on the reserves; the Bill provided for building schools off the reserves wherever there are groups of Indian children.

In presenting the Bill to the House, the Minister said that the educational situation showed considerable improvement. Enrolment was higher, attendance was better, and a school building program had been approved. The Department had been directing its efforts to having more children attend provincial schools. That the educational problem is not entirely solved is indicated by the figures

given in response to questions in the House. Out of some 28,500 Indian children in Canada between the ages of seven and sixteen years, there were only 139 in grade 10, 99 in grade 11, 46 in grade 12, and 5 in grade 13.

A second specific recommendation was that the staff of the Department of Indian Affairs should be strengthened and improved. There should be an appraisal of the present staff to ensure that they were qualified for their posts and suited by personality and inclination to work sympathetically with Indian people. "Suitable Indian personnel should be introduced wherever possible" and "the policy should be adopted of selecting and training Indian workers to take over in due course administrative and service responsibilities both in the agencies and at headquarters". The Parliamentary Committee recommended that there should be a Commissioner of Indian Affairs with the rank of deputy minister, and at least two assistant commissioners of whom one should be a Canadian of Indian descent.

We also asked the Department to employ a number of professional social workers. At headquarters there should be a "qualified staff of welfare specialists . . . to work alongside of other specialists in the fields of health, education, agricultural production, fur conservation, etc.". We asked that a trained social worker or workers be appointed to the staff of each Indian agency. These

workers would be responsible to the Indian agent but would be assisted by the welfare specialists at headquarters. They would provide a generalized welfare service similar to that offered by some provincial welfare departments, including child welfare, family welfare, recreation, and possibly adult education.

In his speech to the House of Commons upon the introduction of the Bill, the Minister said that during the past fiscal year provision was made for the employment of nine social workers and commented that this was something of a new venture. He said that it was the function of these workers to conduct surveys on the reserves with reference to social conditions, particularly in matters of delinquency, destitution and the care of the aged; that they would also encourage the formation of homemakers' clubs and assist in the establishment of young people leaving school; and that an important phase of their duties would be liaison with municipal and provincial welfare agencies.

We wanted to see the question of specific welfare services worked out by agreements between the Dominion and the provinces. The provinces "should share in responsibility for the planning and administration of Indian services." The provinces are much affected by whatever policy the Dominion adopts towards Indians. We also wanted to see Indians assimilated into Canadian life and we believed

that this would be difficult if they were to be treated in such matters as health, education and welfare differently from other Canadians living alongside them. We wanted Indians to have services as good as those offered by the provinces, and yet it seemed foolish and wasteful to ask the Dominion Government to set up a parallel set of services, and better to work out some scheme whereby Indians could take advantage of provincial services with the Dominion Government paying the provinces. Such agreements might allow Indians to attend the regular schools in the provinces, use the health services offered to other citizens, and be eligible for welfare services offered in the provinces, such as mothers' allowances, social assistance or relief, and old age pensions. We wanted a conference with the provinces to be held at once.

Some progress towards this Dominion-Provincial co-operation was mentioned in the Minister's speech when he said that the Federal Government was working on the policy of having as many Indian children as possible attend provincial schools.

We recommended "the transfer of all Indian services from the Department of Mines and Resources to the Department of National Health and Welfare". Changes since that time have made health services for Indians the responsibility of the Department of National Health and Welfare and Indian affairs the responsibility of the new Department of Citizenship and Immigration.

One of our more general recommendations was the "acceptance of full assimilation of Indians into Canadian life as the goal of the Government's Indian program", and this point of view underlies many of our other recommendations. But let us consider our use of the term assimilation. Assimilate means to "make like" and in common use means the disappearance of a group with special characteristics. Is that what we want? Or do we mean that Indians should have the same opportunities as other people, should be given the same services as other people, and given them alongside other people so far as possible? Personally, I should hate to think that Indians would become so like the rest of us that there would be no part of our cultural mosaic which was particularly Indian. We should be quite clear what we mean by "complete assimilation".

I think we should look again at our recommendation that a social worker or social workers be employed in each of the Indian agencies, of which there are some ninety. Is this a realistic recommendation in view of the present shortage of social workers, and would it be a very wise use of the social workers we have? A recommendation that social workers be used as regional field consultants in welfare matters would be one possible amendment. I should like to see us add that social workers entering the Department of Indian Affairs be given a course in social anthropology to understand better the background and customs of

the people with whom they would be working.

The intervening time has also raised a number of questions we did not mention in the brief. Take the vexed question of enfranchisement in Dominion elections. The Parliamentary Committee recommended that "voting privileges for the purpose of Dominion elections be granted to Indians on the same status as electors in urban centres". Presumably the committee thought Indians should be enfranchised without losing their special rights to live on a reserve, etc. On June 19, 1950, the Dominion Elections Act was amended to extend the vote to Indians, the only stipulation being that they waive their right to exemption from income tax. In Saskatchewan, waiver forms have been sent out but none have been returned; but since there has been no election, there is no immediate pressure for enfranchisement. I wonder how far we can go in bringing Indians into Canadian life merely by amending the Indian Act and the Dominion Elections Act.

Bill No. 267 would have allowed Indians to drink on licensed premises, but would leave the existing controls practically the same. The Parliamentary Committee made a very similar recommendation. Other suggestions have been made that Indians should be treated the same as other Canadians in this respect, or that there should be local option on the reserves.

One of the debated points in the Bill is the legal definition of an

Indian. An Indian register was to be established, and inclusion therein would determine whether a person was an Indian. The Minister was given the power to add to, or delete names from, the Indian Register, apparently without consent of the band or tribe being required although there was provision for protest and appeal. The Bill also defined what people were not to be considered Indians, and ruled out those who have one quarter Indian blood or less; certain illegitimate children — (all illegitimate children of males, and in certain cases, illegitimate children of females); and anyone who received half-breed land or money scrip or who was descended from such a person. These sections would exclude many people who have been living as Indians, and gave to the Minister, rather than to the Indians, the right to say who should belong to a band. An illegitimate child takes its status from its mother, but the child might be declared not to be an Indian if the Minister is satisfied that its father was a white man, and could be prevented from living on a reserve and being absorbed into its mother's family group.

We are told that a real difficulty in the attendance of Indians at public schools is the attitude of the white population. Part of the reason why the Indian, and the Metis, have not become more completely a part of Canadian life is because of the lack of acceptance and understanding of him and his ways and his culture. The attitude of the ordinary person will not be

changed by an amendment to the Indian Act alone, and many things must contribute to a changed point of view. Perhaps we should spend a little money to familiarize people with Indian values, Indian culture and the contribution the Indian makes to Canadian life and the Canadian economy. I would like to see the Department of Citizenship and Immigration accept responsibility for developing an active and far-reaching program of interpretation, working with the National Film Board, Boards of Education, museums, and many other public and private bodies.

Part of the Indian's distrust of us and his feeling of frustration and helplessness seems to be related to the feeling of having been unjustly treated in connection with things promised in treaties. We must look at ourselves as well as at the Indians. A number of organizations have suggested the appointment of a *Claims Commission* which would have formal

hearings where the Indians' longstanding grievances could be aired.

I should also like to see a Standing Committee on Indian Affairs appointed in the House. Then there would be a body, ready appointed, that could watch how the new Indian Act is working out and what changes should be made. We would not be running the risk of having Indian Affairs sink into the background again and be neglected for another fifty or seventy years.

It is expected that a revised Indian Bill will be introduced at the present Federal Parliamentary Session. Although we can take some responsibility for seeing that this Bill carries out some of our recommendations, legislation alone will never solve the Indian problem. We have also a responsibility to work in our own communities for a "fair deal" for the Indians. We may not want assimilation; let us see that in our own area we are less guilty than at present of discrimination.

CIVIL DEFENCE

AT A meeting of federal and provincial representatives called to discuss civil defence, on February 23, the Hon. Brooke Claxton, minister of national defence, announced that civil defence matters had been transferred by order-in-council from his department to the department of national health and welfare.

This brings federal arrangements into line with those already existing in several of the provinces where civil defence is being planned by welfare departments. For the first time in Canada, responsibility for civil defence is placed in a civil department of the Canadian government. The department of national health and welfare works closely with provincial-local authorities in other fields of health and welfare, and is therefore particularly well suited to its new task.

RESULTS OF COMMUNITY CHEST CAMPAIGNS HELD IN CANADA DURING 1950

City	Number of Member Services	Total Amount Raised in 1949	Objective in 1950 Campaigns	Amount Raised in 1950	Percentage Raised of 1950 Campaign Objective	Raised in 1950 as a Percentage of Amount Raised in 1949	Per Capita Contribution 1950
Belleville	3	\$ 14,659	\$ 25,000	\$ 16,400	65.0%	112.0%	\$.66
Brandon (spring)	7	29,599	52,500	41,139	80.0	141.9	2.00
Brandon	10	81,608	90,000	77,991	88.0	96.0	2.10
Calgary (spring)	23	250,766	255,000*	272,315	106.8	108.6	2.47
Charlton	10	43,553	49,900	44,955	90.0	103.2	2.04
Cornwall	7	17,333	18,500	18,331	99.1	106.0	.61
Drumheller	9	13,500	15,000	Not Reported	Not reported	Not reported	Not reported
Edmonton	28	161,072	175,000	171,597	98.0	106.6	1.18
Espanola	11	9,042	8,500	9,014	106.0	100.0	3.00
Fort William	7	37,700	38,300	35,403	92.4	94.0	1.04
Galt	9	33,535	34,000	30,355	89.3	91.0	1.73
Guelph	10	35,328	40,000	38,406	96.0	108.7	1.38
Halifax	19	115,000	141,220	126,400	89.5	109.9	1.26
Hamilton	27	335,250	370,704	355,863	96.0	106.1	1.82
Hull	10	27,474	30,000	30,000	100.0	109.0	.73
Joliette	17	19,450	25,000	22,706	90.8	116.0	1.23
Kelowna	15	No campaign	22,500	17,900	79.5	No Campaign	1.50
Kingston	12	58,570	65,000	58,500	91.3	100.0	1.68
Kirkland Lake	11	29,582	35,250	35,250	100.0	119.2	1.75
Kitchener-Waterloo	15	125,000	121,044*	118,332	96.8	94.7	2.23
Lachine	4	10,522	10,500	11,791	112.2	112.0	.40
Lindsay	9	12,100	11,500	11,700	102.0	96.7	1.17
London	11	175,000	197,000	192,500	97.7	110.0	1.93
Lethbridge	17	45,398	50,000	48,871	97.7	107.6	1.96
Montreal Welfare Feder'tn.	30	1,199,000	1,250,000	1,261,931	100.9	105.2	2.52
" Fed. of Catholic Charts	25	303,895	310,000	320,010	103.2	105.0	
" French Cath. Fed. (spr.)	38	1,037,000	1,150,000	1,120,896	97.5	108.1	
" Fed. of Jewish Philan...	7	405,534	455,287	448,007	98.4	112.0	
Moose Jaw	11	31,913	40,000	29,021	72.5	91.0	1.16
Niagara Falls	9	51,706	57,000	52,200	91.5	100.7	1.33
New Westminster	7	52,000	55,000	53,500	97.3	102.9	2.43
Norfolk County (Simcoe)	2	12,500	15,000	10,041	67.0	80.0	.30

New Westminster	7	52,000	55,000	53,500	97.3	102.9	2.43
Norfolk County (Simcoe)	2	12,500	15,000	10,041	67.0	80.0	.30
Oshawa	16	96,000	102,500*	114,824	113.7	119.6	3.28
Ottawa	23	311,951	337,482	322,160	95.5	103.3	1.63
Peterborough (spring)	11	75,580	75,000*	76,309	101.7	101.0	2.00
Port Arthur	10	37,297	41,000	37,937	92.5	102.0	1.19
Preston	7	14,297	15,000	14,597	97.2	102.0	2.18
Quebec City (spring)	16	162,670	225,000	225,000	100.0	138.3	.98
Regina	20	102,208	103,500	102,764	99.3	100.5	1.42
Saint John	8	73,780	96,500	74,495	77.2	100.9	1.24
St. Thomas-Elgin	5	19,500	25,000	20,000	80.0	103.0	.80
Sarnia (spring)	7	53,000	50,000	50,000	100.0	94.3	2.25
Saskatoon	14	66,600	68,000	65,600	96.5	98.4	1.24
Sault Ste. Marie	8	32,000	32,500	31,826	98.0	100.0	1.25
Sherbrooke-Campagne de Charite (R.C.)	10	26,629	25,000	26,400	105.6	100.0	} .97
Sherbrooke-Lennoxville (Prot. and Non-Sectarian)	7	—	25,000	22,355	89.4	—	
Stratford	6	No campaign	27,500	28,104	102.0	No campaign	1.49
Sudbury	14	82,500	100,000	93,000	93.0	112.0	1.55
Toronto	66	2,344,569	2,495,000	2,434,192	97.6	103.8	2.50
Vancouver	40	751,739	850,000	833,500	98.0	111.0	1.95
Victoria	16	140,000	181,293	181,000	100.0	129.0	1.60
Whitby	8	5,640	5,600	5,704	103.7	101.1	1.00
Windsor (spring)	10	217,000	240,000*	240,000	100.0	110.6	1.55
Winnipeg	30	554,623	595,000	560,000	86.1	101.0	1.92
Totals	782	\$9,942,202	\$10,929,580	\$10,641,092	97.5%	107.3%	\$2.14

*Calgary included Red Cross for \$75,000; and for capital needs of C.N.I.B. \$11,000; and Lacombe Home \$15,000.

Kitchener " " " " \$ 5,750.
Oshawa " " " " \$17,500.
Peterborough " " " " \$20,000.
Windsor " " " " \$74,057.

Compiled by Community Chests and Councils Division
CANADIAN WELFARE COUNCIL
245 Cooper Street, Ottawa, Canada.

Recreation and Mental Health

By WILLIAM MENNINGER, M.D.

(From an address given at the Congress of the National Recreation Association)

RECREATION has not only played an important part in the treatment program of many mental illnesses but it has been a considerable factor in enabling former patients to remain well. Therefore, psychiatrists believe that recreative activity can also be a valuable preventive of mental and emotional ill health.

Mental and emotional ill health too often is not understood by the non-medical person. Sickness of the mind is thought of only as the extreme forms, in terms of "going crazy," "losing one's mind" or "being insane." The psychiatric patient and his relatives too often fear and actually find that they are stigmatized by the patient's illness, if it is discovered. The public is just beginning to learn that there are different kinds and degrees of mental ill health just as there are of physical ill health. To be ill psychologically is not a matter of sin or shame; it is not a sentence to isolation or to indefinite invalidism. But mental illness is a robber of energy and happiness which may beset anyone. No one is completely immune to its attack. However, there are ways whereby one can reduce the risk of being waylaid by it. Moreover, one should realize that only in an occasional instance does mental ill health bring about permanent incapacity.

Last year the 680,000 beds in mental hospitals had an average occupancy of 650,000 persons. Between 50 percent and 60 percent of all the patients in our Veterans hospitals have some type of sickness of their personalities.

The seriousness of the problem within the military service is indicated by the fact that 718,000 men had to be discharged because of some type of personality problem. This was the largest single cause of the loss of manpower during the war. More men were discharged because of personality problems than for all other types of medical illnesses or disorders put together. [These figures are for U.S.A.—Ed.]

In civilian life every physician both knowingly and unknowingly treats patients who are emotionally ill. It is estimated that 50 percent of all patients who consult all physicians, general practitioners and specialists, become ill from the stress and strain of life on their personalities rather than from the invasion of bacteria, injury or cancer. The pain or discomfort is not related to any physical change in their organs but rather to mismanaged emotions. These emotions reflect themselves in hearts and stomachs, intestines and joints, so that patients complain about the discomfort or malfunction of these organs. The real cause of the symptoms, however, is an emotional conflict.

All of the above figures pale into relative insignificance in comparison to the total amount of mental illness, either in terms of cost or of time lost. Any estimate of the total picture would have to include the extent of emotional upsets which incapacitate people temporarily. Such upsets are really a mild form of illness even though they are often not so regarded. The transient emotional disturbances which do not necessarily keep a person from his work, do reduce efficiency and satisfaction.

Emotional maladjustment costs energy and therefore money. One pays in some way or other for disappointment, frustration, insecurity, hostility. Many varied symptoms result, in the form of depression, anxiety, fear, suspicion. It is acted out and evidenced in our life in marital problems, misbehavior, prejudice, discrimination and anti-social acts. Even mild maladjustment may become chronic or acutely severe if it is not corrected; and therefore prevention and early relief of the troublesome conflict is important. From the standpoint of national health, this must be a matter of special concern for all of us.

Like many physical sicknesses, many personality disturbances can be prevented. Some basic principles about mental hygiene and ways to maintain mental health are now set down in language for laymen. We in psychiatry are making numerous efforts to publicize the "whys" and the "hows" of mental hygiene. Psychiatrists are now able

to point the way towards the improvement of personal relationships in the family, in the community and at work. They also realize the necessity for reducing the psychological stresses and providing psychological supports for the individual and for the social unit.

Among the many factors responsible for increasing the extent of delinquency, one must reckon with the changes that are taking place in our family life and structure. The incidence of crime, which is an expression of maladjustment, has reached an all-time high. The federal government is spending nearly ten times as much money to handle our social failures—the delinquents and criminals—as the federal budget allows for the improvement of mental health. The cost of operating the penitentiaries and reformatories is "chicken feed" in comparison to the actual cost of crime to the country—estimated to be between eight and ten billion dollars a year.

Society's enormous loss of manpower because of personality disorders—whether it is measured in money, time, or effectiveness—is a problem of health as well as of economy. There is an imperative need for society—that is for individuals like you and me—to initiate corrective measures of every possible sort. As a psychiatrist, I feel that recreation workers can contribute to such a program in very large measure.

"Recreation" can be used to refer to an enormous variety of human

activity. What is the vocation of one man becomes the avocation of another.

In this group the word recreation refers to the things a person does for the fun of doing them, usually with no specific utilitarian or economic motive. Such activity has a renewing effect psychologically. It is a recreative experience. It enables a person to go back to psychologically unrewarding routine or work where the motivation is purely "to get the job done."

Since life exacts a different toll from each of us, different sorts of recreations appeal to us. Psychiatrists cannot yet explain scientifically the psychological value of all types of activity, for obviously these must differ in considerable degree for different individuals. However, there are at least three common psychological needs that are effectively met through participation in certain forms of recreation.

1. Competitive games provide an unusually satisfactory social outlet for the instinctive aggressive drive. Psychiatrists postulate the existence in the personality of an aggressive instinct which constantly seeks expression. Where its direct expression is denied, symptoms may develop. There are perhaps specific values in varying degrees and types of competitive activity. The most aggressive outlet is seen in those sports in which there is bodily contact. The outlet is probably least but nonetheless evident in sports of sedentary intellectual competition such as chess,

checkers, bridge, poker and so on. All these types of recreation meet the psychological need of many individuals whose jobs or daily work prevent sufficient expression of aggression.

2. The psychological value of certain kinds of recreation lies in the opportunity to create. In addition to the aggressive drive, the other important psychological instinct is the erotic, constructive or creative drive. Many people have little opportunity in their daily lives to create. As a consequence, they find great satisfaction in producing something—a rug, a chair, a piece of music, a poem, a cake.

3. Relaxation through entertainment also satisfies an important psychological need, through catering to the passive desires of many of us, as well as to provide an opportunity for vicarious participation. Many persons derive an enormous satisfaction from listening to music, seeing a ball game or a movie, reading a mystery book, or studying art masterpieces.

Mentally healthy people participate in some form of volitional activity to supplement their required daily work. This is not merely because they want something to do in their leisure time, for many persons with little leisure make time for play. Their satisfaction from these activities meets deep-seated psychological demands, quite beyond the superficial rationalization of enjoyment. The choice of activity is modified by their method of living and experience.

By comparison with two generations ago, there is today a greater need for recreative play. People now have little opportunity to express their aggressive needs, to pioneer, or to explore. Jobs, even though satisfying in most respects, provide a limited opportunity for spontaneous creativeness or a free choice of the type of activity.

Some very concrete evidence of the relation between avocations and mental health was revealed in a survey made at our clinic some years ago. A group of well-adjusted individuals was surveyed as to the type and number and duration of their hobbies. The findings were compared to those from a similar survey of a group of psychiatric patients. In the well adjusted group, both the number and the intensity of the pursuit of hobbies was far in excess of those of the patients. This cannot be interpreted to mean that because the individual has a hobby it necessarily keeps him well. It does mean, however, that a well-adjusted individual learns how to play and does include play as an important feature of his life much more frequently than does the average maladjusted person.

Too many people do not know how to play. Others limit their recreation to being merely passive observers of the activity of others. There are individuals who harbor the belief of our early forefathers that to play is sinful. Others feel that play is only for children and believe that "As I become a man I put away childish things." Still

other individuals regard play as simply a waste of time as well as energy. By some play is considered to be a reward for good behavior and thus in many of our backward penitentiaries sports or recreation are regarded as an unwarranted indulgence of the prisoners. There are still other individuals who have had such a severe and rugged life as children that they have never learned to play.

The psychiatrist is strongly in disagreement with all of these attitudes. There is considerable scientific evidence that the healthy personality is one who not only plays, but who takes his play seriously. Furthermore, there is also evidence that the inability and unwillingness to play reveals an insecure or disordered aspect of the personality.

To date the psychiatrist has not taken a major interest in the leisure activity of healthy individuals or programs of recreation in communities. His job has been, is, and will be concerned with the diagnosis and treatment of the anxious, the distraught, the bewildered and the confused members of society. To help these people he must know about the anatomy and the physiology of the personality, in addition to the physical condition of his patient. He is deeply interested in how that patient gets along in his family, with his friends, on the job. He tries to discover the cause of the maladjustment, either within the patient's personality or in the stresses of the environment. Therefore the psychiatrist must learn a great deal about the way

he lives, loves and hates. Among many other things, he wants to know if his patient plays, how he plays and his motives for playing.

Then he must plan treatment to fit the individual needs of his patients. He uses recreation extensively in the hospital program of his patients. As a result of this experience, psychiatrists have accumulated considerable data on the utilization of recreation as a supplementary treatment measure. For at least 20 years in our hospital in Topeka, we have prescribed the specific types of recreation activities that we believe to be the most suitable to alleviate specific symptoms of patients.

The aim of the psychiatric prescription is to direct troublesome feelings into a socially approved outlet. In some personality disorders, the symptoms conspicuously express hostile feelings. Intense feelings which the patient harbors that were probably directed originally toward some member of the family have become displaced and may be expressed toward any person, or even any object in the environment.

We have conducted many experiments in re-direction of emotions. For instance, there was a patient who was very hostile to his father even though he maintained that he loved him. We drew a face on a punching bag and suggested that the image was that of his hated parent. Thereupon, he tied into the punching bag to the extent of his feelings. In another instance, practice on a driving range was

enhanced by giving each golf ball the name of some disliked person. This particular person had a long list of people he thoroughly disliked and, as one watched, it was apparent that varying amounts of energy were invested in each drive, depending on the intensity of the feelings towards the person whom the ball represented.

In the majority of instances this direct approach is impossible, either because the hostility is too diffuse or because the patient feels too guilty and must express his hostility in more subtle, unrecognized forms. He "blows off his steam" in a baseball or volleyball game or a tournament, with an obvious release of tension.

The second therapeutic use of recreation is to provide an opportunity for creative experience. This has seemed particularly valuable for the frustrated individuals who in their personal relationships have been thwarted in achieving sufficient satisfaction. Again and again a patient will become intensely interested in the creation of some article of craft work. It is quite discernible in some cases that the symptoms diminish as the interest increases. This can be observed in those who have never had any previous experience in the medium with which they choose to work—woodworking, weaving, leather, clay, art work, and so forth. Pride in their finished product is very conspicuous. Some patients have gained so much satisfaction from a particular type of craft work that they have continued the

activity upon their return home. In many instances, this has led to the establishment of a reasonably complete workshop.

Another psychological need in certain individuals is to do things in a very particular way. The arrangement of clothing in the closet or emphasis on punctuality or cleanliness becomes very important. The psychological explanation of such behavior is that it prevents the person from developing anxiety about an inner urge to do the opposite. When the compulsive person cannot carry out his activities, either because of internal disturbances or external prohibitions, he becomes maladjusted. When these defences do break down, the therapeutic aim is to help him find ways of alleviating anxiety through the re-establishment of compulsive activity.

In a specific instance in which this type of recreation was prescribed, the patient had always been, prior to his illness, an extremely punctual, precise and exact person. Some time after he had passed the age of 50 he had had some rather severe difficulties in his home and his life became quite disorganized. Incidentally, this individual, as many compulsive people do, had always taken a very special interest in his finances, in keeping his accounts, and prided himself on the size of his bank account. In the therapeutic program arranged for him in the hospital, attempts were made to interest him in several types of activities, with the hope that we would find something

interesting to him. In view of his orderliness, his interest in money, his hoarding tendencies, he was encouraged to take up coin collecting. With very little help, this became almost a full-time activity. He pored over thousands of pennies, then nickels, then dimes, hunting for certain dates and mint marks. While in the hospital he began to contact coin dealers. He spent hours making boards to mount his coins and in polishing and arranging his selections. Progressively with his interest in this activity, he became increasingly better adjusted socially. Within two months he was able to leave the hospital. We learned subsequently that he continued his avid interest and activity in coin collecting. Lest this be misunderstood, I should state that his coin collecting did not cure him. It simply served as a very expedient outlet for his compulsive makeup. With psychological guidance he gained some insight into the nature of his illness and the reasons for the particular appeal of this activity.

One other prescribed recreation activity has proved again and again its important therapeutic value. This is the socialization provided by group activities—parties, ball games, square dances, dramatic productions, and so on. All of us have the desire to belong—to the family, club, gang or to some other preferred group. One of the conspicuous symptoms of some types of mental maladjustment is the feeling of lonesomeness, the inability to identify with and belong

to a social unit. The average psychiatric patient during his illness is conspicuously incapable of feeling comfortable with other people. An important phase in the process of getting well is to be able again to become sociable and to participate pleasurably in an activity with someone else or with many other people. Therefore, the plan in every good psychiatric institution is to provide opportunities for socialization.

Obviously, they must be graded according to the patient's capacity and specific needs. Routinely in our hospital, a plan is followed whereby the patient is first given the opportunity to become friendly with one of the staff—a nurse, recreational or occupational therapist—in addition to his physician. As the patient becomes able to adjust himself to this, his contact is expanded to include initially one other patient and then a small group of them. Graduation takes place as fast as possible to the passive role of a spectator in a larger group of people and eventually to the active role of a participating member of a team. Recreation opportunities are by all odds the most practical vehicle to accomplish this aim.

On the basis of his experience with its use as a psychiatric treatment method, as well as through his conviction as to its importance in the maintenance of mental health, the psychiatrist can make certain recommendations about recreation.

To the Individuals: Good mental health is directly related to the capacity and willingness of an individual to play. Regardless of his objections, resistance, or past practice, any individual will make a wise investment for himself if he does plan time for his play and take it seriously.

To the Recreation Worker: The psychiatrist strongly recommends a working knowledge of the structure and method of function of the personality. This would provide a better understanding of individual persons and their reactions and, more important, of psychological needs and handicaps which might be met most effectively by particular forms of recreation. In addition he would recommend a study of the scientific data regarding leadership methods. He would recommend a general knowledge of the social forces operating in groups which may greatly enhance or detract from the effectiveness of any recreation program.

The psychiatrist would further recommend to the recreation worker the importance of taking aggressive steps to educate the public as to the value of recreation in the maintenance of mental health. In such a campaign he would wish to have emphasized the fact that recreation, which is literally re-creating relaxation from regular activity, is a morale builder. It is not a luxury, a waste of time or a sin. He would also wish to have pointed out the fact that the most constructive and beneficial play is something that has to be

learned and is not likely to be an accidental ability or an inherited trait. Personality characteristics and psychological needs provide the basis for the appeal of specific

types of recreation. For maximum satisfaction, one requires not only encouragement but almost always some instruction.

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A BOUQUET FROM AUSTRALIA

WE ARE pleased to get a word of praise for *CANADIAN WELFARE* from the Antipodes. The following is an extract from a letter to Dr. George F. Davidson, deputy minister of welfare, from Mr. F. H. Rowe, director-general, Department of Social Services, Commonwealth of Australia, February 14, 1951:

"We keep in touch with Canada largely by reading *CANADIAN WELFARE* issued by the Canadian Welfare Council, and in addition I find the journal issued in British Columbia [British Columbia's Health and Welfare] full of interesting and valuable information. . . . We in Australia probably get more value from articles appearing in the journal 'WELFARE' than we do from most other sources. Quite eagerly do we await its arrival and each issue is in constant demand here in the Headquarters of this Department."

It is a pleasure to share this compliment with our British Columbia contemporary.

At this time we are eager to hear from other readers what they think of our magazine: what they like about it, what they dislike about it, and what kind of articles they like to find in it. Won't you please write a letter to the editor?

TOTAL REHABILITATION

I BELIEVE that we should view the process of rehabilitation in its broadest terms. Rehabilitation should be a planned and continuous procedure, not a series of isolated events. The restoration of the individual as a social unit is often a prolonged and difficult process. Proper rehabilitation is something more than medical or vocational care. It is a complete physical, mental, social and even spiritual restoration of the individual to an effective, useful and satisfying life.

An important element of any successful rehabilitation program is public education. Crippling is emotional as well as physical. The way people feel towards them has a great deal to do with the readjustment of the handicapped. . . .

There is also a continuing need to educate employers in the value of handicapped workers. Our handicapped are needed in the labour force more to-day than ever before. Employers should hire handicapped persons—not on humanitarian grounds, but because it is good business. They should be reminded that a physical handicap is not necessarily a job handicap. No one is perfect—everyone has a deficiency of some kind. A man's ability is far more important than his disability."

—From an address given by Honourable Paul Martin at the National Conference on Rehabilitation, Toronto, February 1, 1951.

Nation-Wide Survey of Demand for Social Workers

THE directors of public and private agencies and institutions across Canada will soon be approached to help in the National Survey of the Effective Demand for Social Workers, scheduled for this spring.

The Survey will cover all full-time paid employees in welfare positions, whether trained or not trained in social work, as well as vacancies and new positions to be set up. It will measure the gap between supply and demand for graduates from schools of social work and will show the distribution and use made of the staff now employed. The findings should enable the individual agencies better to evaluate their staff situation in relation to national and regional demand, to gauge the extent and types of in-service training which may be required to meet their immediate shortages, and to interpret their needs to the schools of social work. In view of the international situation, the Survey assumes added significance. Should a serious emergency develop, it will be essential to know the distribution of experienced staff.

The Survey is the result of a recommendation to the Minister of National Health and Welfare by the National Conference on Personnel in Social Work, now repre-

sented by the Personnel Committee of the Canadian Welfare Council. Through this Committee the Research Division of the Department, responsible for conducting the Survey, has the co-operation of the Canadian Welfare Council, the Canadian Association of Social Workers and the Schools of Social Work. An advisory subcommittee on the survey was set up in May, 1950.

A nation-wide project of this kind can be successful only with the active support of all welfare agencies and a willingness on the part of executives to give the time necessary for the careful completion of the questionnaires, even at some sacrifice of leisure.

While there will be some variation in organization across the country, the general plan is to ask one agency in each community or rural area to act as Survey representative in interpreting the project and insuring full local coverage. The explanatory materials and questionnaires are to be sent to the individual organizations and the completed forms returned direct to the research division. The information on individual agencies will be entirely confidential; no names or identifying data will be released.

What the Council is Doing

The report of the Division of Public Welfare's Committee on Public Assistance was presented at the Division's meeting in Regina last month. It underwent a day's discussion there and has since been considered by the Family Division and plans are being made for further examination by all interested groups. The report looks as if it will become another in the Canadian Welfare Council's series of basic documents on Canadian social welfare. David Croll, Toronto M.P., was chairman of the 40-person assistance committee, with staff help from Elizabeth Govan. The committee states that Canada's first defence against poverty is high employment, for which the Federal government is responsible. Next comes unemployment insurance, and, says the committee, in times of mass depression insurance benefits should continue after a worker's "legal" right has run out. For employable persons not covered by unemployment insurance the committee suggests that the Federal government purchase assistance services from the provinces and municipalities. Responsibility for unemployables is placed squarely on the provinces and local governments.

The Council has received a letter from national Red Cross Commissioner J. Stuart Stanbury

thanking it for help in securing a welfare officer for the welfare team that the Red Cross has sent to Korea.

Although the autumn community chest campaigns are still seven months away, discussion regarding many of the publicity items—posters, street-car cards, real red feathers, and so on—is over and procurement of the materials is underway. The major decisions were made at the January meeting of the Community Chests and Councils Division. Fifty people, representing chests and councils in 15 cities, including Vancouver, Edmonton, Winnipeg, and Fort William, attended the two day meeting, which was preceded by a half-day preliminary session on campaign promotion and publicity. The basic design to be used on posters, billboards, and other display pieces will carry a red feather and the words **SAY YES — GIVE ENOUGH — THROUGH YOUR RED FEATHER CANVASSER.** An alternative bottom line, **THROUGH YOUR COMMUNITY CHEST,** will be offered on the posters. . . . C. W. McQuillin, Toronto, radio director of the advertising firm of Cockfield, Brown, has agreed to chair the Division's Public Relations Committee another year. He will retain the help of L. D. Headley and C. F. Chitty who

last year did such a splendid job of arranging, respectively, national radio and magazine publicity. Both live in Toronto; Mr. Headley is manager of RCA Transcription Service and Mr. Chitty is media manager for Cockfield, Brown. . . . Because of threatening metal shortages, a large supply of metal red feather lapel tabs has been ordered by the Division for the chests.

The Family Division staged a major discussion on counselling services at its recent meeting in Toronto. Many of those present stressed the need for clarification between family, marriage, and pre-marital counselling. It was the consensus that the greatest demand today is for the last named. The meeting expressed the belief that the family agencies are particularly and uniquely able to offer counselling services to the whole family group on the widest range of problems. Again and again at the meeting the necessity of using only skilled case workers for counselling was emphasized. . . . The Division has set up a Committee on Board-Staff Relationships, with Father A. J. Sweeney of Toronto as chairman.

A series of meetings regarding the Recreation Division of the Council culminated in Toronto last month with a re-definition of the Division's functions. Here they are as they now stand:

- 1) To promote person-centered (rather than team-centered) recreation and the group work method.
- 2) To assist recreation divisions of community welfare councils.
- 3) To promote recreation services for special groups such as the family, pre-school children, the aged, etc.; and to encourage pilot projects demonstrating these services.
- 4) To hold conferences on current problems and development in recreation.
- 5) To provide a medium for joint planning and co-operative action by national organizations operating recreation programs.

Although not set out as a function, it was suggested that the Division stimulate periodic meetings of the "clearing" type for recreation planning and co-ordinating groups. The institute service that the Division has carried on over the past two years was approved and plans are being made to extend it.

E. R. McEwen, secretary of the Recreation Division, has completed a memo on "The Role of the Service Club in Community Recreation". An article based on the memo will be carried in the next issue of this magazine.

R. E. G. Davis, executive director of the Council, and Elizabeth Govan, secretary of the Division of Public Welfare, attended the Conference on the Rehabilitation of Disabled Civilians in Toronto as representatives of the Council. . . . Jack Anguish, executive director of the Windsor Community Fund, comes next month to join the staff. He will be associate secre-

tary of the Community Chests and Councils Division. Henry Stubbins, Division secretary, is now out west. . . . Phyllis Burns, secretary of the Child Welfare Division and acting secretary of the Family Division, is on an extended field trip that will take her as far as Victoria, B.C. . . . David Crawley, our public information man, is helping with the planning, procurement, and distribution of chest campaign publicity materials. . . . Marie Hamel, secretary of the French-speaking Advisory Commission, is back from a holiday in Florida. . . . The Council is reprinting R. E. G. Davis' article "Canadian Social Work" from the 1951 *Social Work Year Book* and Elizabeth Govan's article "Needs of the Aged" from the *Dalhousie Review*. Miss Govan's article is also being reprinted in the *Monthly* of the Canadian Brotherhood of Railway Employees. . . . D. W. McGibbon, treasurer of Imperial Oil, Toronto, has consented to act as vice-chairman of the Council's Finance Committee and is now a member of the Board of Governors.

Community chest representatives who attended the January meeting in Toronto of the Community Chests and Councils Division

expressed concern about multiple and over-lapping financial appeals and the effects on voluntary social welfare of the expanding preparedness program. Over and over chest people reiterated that their organizations are already federations of charitable appeals and therefore are eliminating scores of separate campaigns. There is strong resistance among the chests to any consideration of them as "just another campaign". A motion suggesting the creation of a national appeals review committee, with local counterparts, was passed by the Division and a committee was set up to study the multiplicity problem. Members are W. H. Dewar, executive director of the Community Chest of Greater Toronto; Trevor S. Moore, Toronto, finance chairman of the Council; Carl Reinke, Montreal, chairman of the Division; Gerald S. Chandler, executive director of the Hamilton Community Chest; and Prof. Frank C. Knox, Queen's University, board member of the Kingston Community Chest. . . . A panel on Canada's accelerated defence program as it affects voluntary health and welfare agencies was a high point of the Division meeting. The Division asked the Board of Governors of the Council to set up a committee to look into these matters and the Board is acting on the request

COME TO THE ANNUAL MEETING

May 2, 3, 4

KING EDWARD HOTEL, TORONTO

"Welfare is Defence"

A C R O S S C A N A D A



Parliament Hill The fourth session of the 21st Canadian Parliament opened late in January with tension among nations creating an uneasy atmosphere in which to consider the social welfare of Canadians. In the speech from the throne the Governor-General said that while the policies of the government are designed to prevent war, the dangers of the international situation and the magnitude of the defence effort have created an emergency situation. "You will accordingly be asked", he said, "to approve legislation vesting in the governor in council additional powers to ensure adequate defence preparations to meet the present emergency and to prevent economic dislocation resulting from defence preparations."

There are, however, a number of matters coming before the House which will be of importance in advancing, or at any rate modifying, the welfare of Canadians. There will be, for instance, legislation respecting the application of the benefits of the veterans' charter to members of the special force; Bill No. 267, a complete revision of the Indian Act (discussed elsewhere in this issue); amendments to the Immigration Act; and the report of the Royal Commission on National Development in the Arts, Letters and Sciences.

Proposals have been put before the provincial governments for new tax agreements and for a contributory old age pension along the lines recommended by the joint committee at the last session. Letters were sent to the premiers of all the provinces asking them to submit to their governments

two proposed amendments to the British North America Act respecting old age pensions and a provincial sales tax. The proposal regarding sales tax was that the provinces should be permitted to levy indirect taxation within the province on the sale of goods at a rate not exceeding three per cent of the sale price. At the time of writing several provinces had replied making suggestions about the content or the phrasing of this amendment.

The housing outlook may become less hopeful with the announcement on February 5 by the Honourable Robert H. Winters, Minister of Resources and Development, that provisions for lending under the National Housing Act have had to be changed because of the short supply of building materials. "What the government most wishes to avoid", he said, "is the starting of a large number of houses which could not be completed." The additional loan of one-sixth of the basic loan has been dropped and loans under the Act will now be limited at once to 80 per cent of lending values prevailing in January, 1950, and down-payment requirements have increased by a corresponding amount. This means that down-payments are greater by about \$1,000 on five-room houses and \$1,500 on six-room houses. The Minister urged builders and home owners to consider carefully the difficulties which might be encountered because of the scarcity of materials before beginning building operations, but also said that housing would be given priority only second to the defence program in the use of available supplies of materials. Efforts will be made to assure that housing

will be provided in areas where it is most needed, especially in centres where the defence program is heaviest.

Relief Team for Korea The Canadian Red Cross is sending a three-man relief team to Korea. Similar teams will be formed, at the request of the United Nations, in the United States, Great Britain, Australia, Denmark, Norway, Sweden, Italy and Belgium.

The Canadian team consists of Tin Yeh, formerly sanitary engineer for Etobicoke Township, who will be spokesman for the group; Dr. O. A. Wiesner, medical officer; and Mr. Jack Alexander Purves of Cranbrooke, B.C., welfare officer. The team goes first to Lake Success and then to Tokyo where it will report to General MacArthur's headquarters.

Staff Forums on Civil Defence In January the first of three staff forums on civil defence opened at de Salaberry Armouries in Hull, with some 32 representatives attending from various federal, provincial, municipal and civil organizations from across the country.

The forums will last for 12 days, and a different group of students will attend each. Lectures will be on such subjects as organization for civil defence; atomic, chemical and biological warfare and their preventive medical aspects; fire and fire fighting; problems caused by high explosives; training and recruiting for civil defence; role of the armed services; warning systems and shelters; and the basic problems of welfare, policing, and casualties.

Help to Western Society for Physical Rehabilitation The federal government has allotted \$7,000 to aid the Western Society for Physical Rehabilitation, Vancouver, in buying special equipment

for its work of training handicapped children. The grant will pay for the equipment of the new wing of the Society's building, particularly for the extension of physiotherapy, hydrotherapy, remedial and speech therapy. Last June the federal government contributed \$30,000 toward the building costs of the new wing.

Legal Aid in Ontario A plan for establishing legal aid clinics to provide legal services and assistance for needy persons was recently approved by the benchers of the Law Society of Upper Canada. The plan provides for the establishment of clinics in each district and county in Ontario. The clinics will be administered by local law societies, and will be in operation in 1951.

Two years of research by a committee headed by R. M. W. Chitty of Toronto preceded the drawing up of the plan. W. Earl Smith, secretary of the Law Society was appointed director.

Special Placements Section, National Employment Service A recent report of the National Employment Service operated by the Dominion Government states that in the course of the past year 11,000 persons with physical and other disabilities had been placed in employment. During the past two years a special service to help ex-convicts has come into operation, and since June, 1948, more than 350 discharged prisoners have been aided in finding suitable employment.

St. John Ambulance and Red Cross On January 26 the Canadian Red Cross Society and the St. John Ambulance signed what has been described as a 19-point pact defining their spheres of effort to prevent possible overlapping. Money will continue to be raised by

each body independently, but the agreement calls for the appointment of a joint operational committee to study matters affecting both organizations. Blood transfusion, nursing, home nursing, sickroom supply services, teaching of first aid, first aid posts, and patrols at public gatherings and on highways are some of the services on which agreements were reached.

Mental Health Plan for Ontario

Ontario's minister of health, Dr. MacKinnon Phillips, recently announced a new provincial mental health program, now in the planning stage. The plan is based on the idea of a community team of consultant psychiatrist, nurse, psychologist and sociologist to carry on educational, diagnostic and treatment service.

"We feel that our first requirement is to plan to help our citizens avoid the necessity for mental hospital care and treatment, and this can be done within the community," Dr. Phillips said. While emphasis in the plan is on prevention, he said the treatment side of the problem would not be overlooked. Expansion of facilities for treatment of the mentally ill is proceeding, with the opening soon of a school for mental defectives at Smith's Falls. The hospital will accommodate 2,400 patients, relieving strain on other institutions.

Research on Psychological Effects of Diabetes

The psychological effects of diabetes on children are being studied at the Hospital for Sick Children, Toronto, with the aid of a federal health grant.

There is a general impression among doctors that diabetic children are more likely to develop behaviour problems than are children with normal health, National Health Minister Paul Martin explained. This view arises because

diabetic children are subject to many restrictions: a controlled diet, a regular routine for administration of insulin, curtailed physical activities, etc.

The research is designed to find out whether the commonly-held view is true and also to discover whether the young patient can be helped by psychiatric therapy in adjusting himself to the measures he must take to control the disease.

Toronto Welfare Council, Volunteer Department

The Toronto Welfare Council has now re-organized and re-opened its Volunteer Department. During the past few months, the Department has been active in building strong community support and has set up an Advisory Committee with as broad representation as possible under the chairmanship of Mrs. Gurston S. Allen.

Simultaneously, a study has continuously been made of the needs for volunteers in all public and private agencies and a recruiting program is now being carried out to find the most suitable volunteers. All new volunteers are given a generalized orientation training course which is planned in co-operation with the agencies.

This is one of four volunteer bureaux now active in Canada. As in Montreal, Winnipeg and Vancouver, the main purpose of the department is to act as a clearing-house for all volunteer work and at the same time to meet the unmet needs by recruiting, placing, and assisting in training volunteers for all health, welfare and recreation services.

Family and Children's Service in Victoria

The Family Welfare and Children's Aid Society of Greater Victoria has now become the Family and Children's Service. This agency hopes to move into its

new building by the beginning of April, and during the year will be celebrating the fiftieth anniversary of its incorporation as The Children's Aid Society.

**Nursing
Homes in
Saskatchewan**

Work on a 150-bed nursing home at Mel-ford, Saskatchewan, will be started in 1951,

Hon. J. H. Sturdy, minister of social welfare, has announced. The social welfare department finds that it can operate nursing homes at a fraction of the cost per patient day of active treatment hospitals, Mr. Sturdy said. The comparison is based on the experience of the Regina and Wolseley Nursing homes. An extension of Oliver Lodge, a home for old age pensioners in Saskatoon, was recently opened officially. This project, operated by the United Church in buildings provided by the department of social welfare, will accommodate approximately 90 persons. As well as attractive single rooms, there are small suites for married couples, a large dining room, lounge and recreation room.

On the same site a nursing home for the care of chronic patients is in process of construction. This home will be placed in operation within the next month or so. It will accommodate 100 patients and is intended for the care of those who do not require active medical treatment but rather nursing care.

**Saskatchewan's
Correction
Program**

On October 1, 1950, the Saskatchewan Corrections Act, the only legislation of its kind in Canada, came into effect. On October 6, the new Saskatchewan Boys' School, replacing the Industrial School for Boys, was officially opened. These are further steps towards implementing the recommendations of the 1946 Commission to Study the Penal System of Saskatchewan.

Two years ago a trained social worker with special experience in correctional work was appointed director of the new Corrections Branch. The branch has jurisdiction over all correctional work in the province. Treatment supervisors, psychologists and education officers are now employed on the staff of the Boys' School and at Regina jail. Similar services will be included in the jails for men and for women at Prince Albert as qualified personnel become available. A few members of this professional staff have been recently secured for these institutions.

The Corrections Act provides for an increased probation service. A probation staff which will have the assistance of clinical resources will become increasingly available to the courts to provide assistance in arriving at the cause of the offender's problem and the most satisfactory solution. The consent of the accused will be one of the factors determining the extent to which the service is employed.

A new Youth Guidance Authority now directs and supervises treatment of juveniles from the time of disposition until the termination of parole. Replacing the old Industrial School Parole Board, the Authority is composed of the director of corrections, the chief juvenile probation officer, the superintendent of the Saskatchewan Boys' School and a psychiatrist.

The Juvenile Court now has two divisions. The Adjudication Division examines the evidence presented and determines whether or not the juvenile has committed a delinquency. The Disposition Division prescribes treatment on the basis of a careful examination of the juvenile and an assessment of his needs.

According to Saskatchewan News, December 1, 1950, results are justifying the new approach. In April, 1949, the

social welfare department was able to close one of the provincial jails (Moosomin), since its population was so small. Prisoners were removed to the Regina jail, which was set up as a modified Borstal type institution for the more reformable young offender within the age group 16-25.

In spite of these additional maintenance and personnel expenditures amounting to over \$100,000 annually, the fiscal operation of the program as a whole has resulted in net saving to the government. The most important effect of the new approach in penology is that Saskatchewan's crime rate has declined in the last few years. The Dominion Bureau of Statistics reports a decrease in crime in this province compared to increases in the other prairie provinces.

Costs of Mental Health Services An analysis of the long-term costs of public and private mental health services in Canada and of the advantages of certain forms of treatment and service is being undertaken at the University of Toronto. The study, expected to take about three years to complete, is being financed from grants administered by the federal Health Department.

The first phase of the work involves a study of the historical background

of mental health policies in Canada. The next part will be a detailed analysis of the costs of mental health services in recent years. The third phase will be an attempt to evaluate in dollars and cents those parts of the mental health program which stress prevention of illness and rehabilitation. Study of these three parts of the mental health problem are expected to raise other questions regarding the economic burden of mental ill health to the whole community.

The research is under the general supervision of Dr. H. M. Cassidy, director of the School of Social Work. Directly responsible for its organization and development is Dr. John V. Machell, aided by a research assistant, Gifford Price. The investigation is to be closely linked with the teaching program for psychiatric social workers, and it is expected that students in this field will be able to make an important contribution to the study.

Commenting on the project, Hon. Paul Martin, minister of National Health and Welfare, said that the information would assist the federal, provincial and municipal governments in assessing the value of present services, planning new ones and developing a program of public information on mental health.

"THE problems of caring for the aged and for the chronically ill are often confused, for two reasons: chronic illness is most prevalent in older persons, and the combination of chronic illness, indigency and lack of a home is found most often among older persons. It is important to remember, however, that the problems of chronic illness are found in all age groups; that the majority of persons with some chronic illness are not old, i.e. are under 65 years of age, and that old age is not a disease or an illness. It would be a disservice to our older population to assume that the care of the aged is the same as the care of the chronically ill. Indeed, it is one of the great needs of older persons to be helped to maintain an active, useful existence as independent members of the community."

—Chronic Illness News Letter, February, 1951.

ABOUT



PEOPLE

The **Rev. Alfred E. Lavell**, Ontario provincial historian from 1931 to 1935, died in Toronto on January 29 at the age of 80. He was born in Kingston, son of Dr. Michael Lavell who was then surgeon and warden at the penitentiary. He was educated at Victoria College and ordained as a Methodist minister, holding charges in several Ontario towns. In 1918 he moved to Toronto and was named executive secretary of the Ontario Parole Board. His greatest interest was in penal and mental institutions, and he accumulated a vast amount of historical material on these subjects, some of which was published and some of which is now in college libraries for the use of students doing historical research.

Thomas D. Ruston, for 32 years superintendent of the Children's Aid Society of the City of Belleville, Hastings County and the Town of Trenton, died on January 9. Mr. Ruston was born in England 75 years ago, and came to Canada in 1909 as a Salvation Army officer. He served in Toronto, Montreal, Brockville and Picton. In 1915 he went to Belleville as officer of the local corps of the Salvation Army, but in 1916 he resigned that position to become superintendent of the Children's Aid Society. He retired in 1948.

Earl Zaph, formerly with Renfrew County Children's Aid Society, is now acting superintendent of the Cornwall Children's Aid Society. **Mrs. R. B. Splane** has moved from

Cornwall to head the Child and Family Division of the Toronto Welfare Council.

Mrs. Donald B. Sinclair, president of the Canadian Conference on Social Work and executive assistant to the deputy minister of welfare, was elected chairman of the executive board of the International Emergency Children's Fund in February.

General R. B. Gibson is a vice-president of the American Prison Association and **Alex. Edmison** is President of the International Prisoners' Aid Association. Both were elected at the Congress of Corrections held in St. Louis last October.

Mrs. Alvis P. Stayt was recently appointed executive director of the new Kitchener-Waterloo Family Service Bureau. Before this change Mrs. Stayt was with the London Family Service Bureau for over three years. Before coming to Canada in 1947 she had been active in the field of social work in England for more than nine years.

H. B. Binny has been engaged as full time campaign secretary of the Victoria, B.C., Community Chest, after being on the staff of the Chest since May, 1950.

Rev. F. N. Poulton has been appointed full-time secretary of the Christian Social Council of Canada.

Ray Auld has left Brantford CAS, where he was acting superintendent, to become assistant director of the Ontario Society for Crippled Children.

BOOK



REVIEWS

SOCIAL CASEWORK IN GREAT BRITAIN, edited by Cherry Morris. Faber and Faber, Ltd., London, 1950.

Much of the impetus for writing this book has come from the post-war flood of social legislation in Britain, which brought with it a greatly increased demand for social workers, and a growing public interest in what they do. Inevitably, this has led to a closer examination of the underlying principles and techniques of this work, and also of the training necessary to achieve the requisite standard of skill.

The book presents in the form of a symposium articles by professional workers in the different specialized fields of casework, namely family casework, medical social work, psychiatric social work, probation work, moral welfare work and child care. These are preceded by two chapters which seek to explain in general terms the scope of casework, its application and methods. The final chapter is by way of being a conclusion.

The articles themselves are compact and comprehensive, each with illustrative case material. One quickly realizes that in Britain, the development in any particular field has resulted from widely differing sets of factors, social and otherwise. Thus we find the historical anomaly of the existence of a series of *ad hoc* training courses. At present, attention is being directed towards establishing the teaching and learning of what is generic in social casework at the basic university level, to be followed by the further training in specialized fields.

Question is raised as to the best use of the qualified caseworker, and the

need is emphasized of giving adequate thought and planning to this point. Like Britain, we too can never have so many trained and skilled workers that we can be other than economical in their use.

Another point emerges somewhat forcibly out of the British experience, where so much social casework is carried on within a statutory framework and it is particularly applicable to any country, such as this one, which is developing more comprehensive social services. This is the necessity of basing administrative machinery on sound casework principles, so that the needs of the individual using the service are not subordinated to those of economical and tidy administration.

It is here that the social worker, with that knowledge of the individual in society which is his alone, can do much to preserve what is recognized as essential to the total well-being of all of us. However, this cannot be done unless social workers, as individuals and as a profession, are prepared to take action in bringing about legislation, and seeing that it is carried through in an acceptable way.

MARGARET MORLEY,
Mental Hygiene Consultation Services,
Toronto.

GROUP THINKING AND CONFERENCE LEADERSHIP, by William E. Utterback. Rinehart & Company, New York, 1950. 245 pp. Price \$2.50.

This book is a practical guide to more effective group thinking. It deals with methods and techniques in discussion, both in discussion groups as such and in groups such as committees which take action based on the results of discussion.

Participants in discussion groups will be stimulated to think about their role as members of the group when they read about the attitudes and discussion habits of members described in Chapter Six. They will enjoy and learn a good deal from Part II, entitled "Thinking Straight", in which Dr. Utterback deals most effectively with the subject or argument and the ways of testing the validity of points made in argument. This section might well be used by a group as a subject for discussion. For the discussion leader the book provides helpful material on understanding group members, suggestions regarding method in moderating discussion and practical suggestions about topics for discussion.

Verbal illustrations throughout highlight the points the author is making and add considerably to the interest. An added feature which makes this a very complete text book for leaders of discussion groups is the excellent list of sources of information on specific topics. Appendix D illustrates the way in which the book could be used as a text for a training course for discussion leaders. Group workers and instructors in adult education will find it most useful for this purpose.

AGNES ROY.
National Y.W.C.A.

PUBLIC HEALTH IS PEOPLE, by Ethel L. Ginsburg. The Commonwealth Fund, New York, 1950. 236 pp. Price \$1.75.

Public health is people—this was the conclusion of the health officers after their 12 day institute in public health held in Berkeley, California, 1948. At this institute eight psychiatrists, three pediatricians and five public health leaders served as faculty for a student body of thirty-five health officers.

Public Health is People, Mrs. Ginsburg's report of this institute, gives a clear concise outline of the proceedings, deliberations and conclusions of the 12 days. In lectures, in daily section meetings, in clinic visits, in intersection meetings, modern mental hygiene principles were explored not as theoretical concepts nor as specialized services, but rather as tools which enable health departments to function more effectively in all their services to the community. Throughout the institute the interview, as a means by which the health department serves the people, was emphasized.

The daily clinic visits provided a wealth of material and enabled the students to see practical applications of what would otherwise have been pure theory. The clinics visited were prenatal, postpartum, child health conference, crippled children, physiotherapy, rheumatic fever, tuberculosis and venereal disease. The health officers interviewed patients individually or in groups. They attended the clinics, not to diagnose or prescribe treatment, but for the sole purpose of interviewing patients to learn their reactions to clinic attendance and to "listen" to the problems on the top of their minds. In "bull sessions" which lasted well into the night, experiences were shared and ideas formulated.

In this experiment in two-way communication, the psychiatrists learned how to make themselves more helpful to the health department; Health officers on the other hand saw that the application of psychiatric concepts gave a more comprehensive and useful approach to public health. To the variety of problems which brought these specialists together—problems of administration, problems of relationships, problems of personnel relationships

within the health department and with that of other professional groups, specific problems such as the impact of tuberculosis on patient and family life—the answer was “public health is people”.

Mrs. Ginsburg, a medical social worker and nurse with extensive experience in the field of mental hygiene, has outlined the conclusions of the institute in a helpful way. *Public Health is People* should be enlightening not only to health officers but to all personnel in the health department or, for that matter, to anyone working with people.

PEARL STIVER,
Department of Public Health, Ottawa.

SOCIAL WORK YEAR BOOK, 1951, edited by Margaret B. Hodges, American Association of Social Workers, 1 Park Avenue, New York 16, N.Y. 696 pp. Price \$5.00.

Most social workers and students of social work are familiar with the *Social Work Year Book*, and yet it is doubtful whether even the people who are most familiar with it make as good use of it as they might: it is so easy to forget how many different kinds of information may be obtained there. It is well known, of course, that this volume contains some seventy articles on social welfare topics, each article written by an authority on the subject and concluding with a bibliography for further study and reading. The list of contributors at the beginning of the volume is in itself a valuable source of information.

The 1951 *Social Work Year Book* includes articles on four new subjects which were not included in previous volumes: *Family Life Education*, *Informal Education*, *Social Work and the National Emergency*, and *Youthful Offenders*. Two topical articles, *Social Insurance* and *Unions and Social Work*,

which were dealt with in earlier issues have been restored. Five other topics which were discussed in the 1949 edition are included in the 1951 edition under new titles: *International Social Work*, *Personnel Standards in Social Welfare*, *Settlements and Neighbourhood Centres*, *Social Work Research* and *State-wide Organization in Social Welfare*. Several topics have been omitted in this new edition, but their subject matter has been incorporated in other articles. Mr. R. E. G. Davis, executive director of the Canadian Welfare Council, has written the article on *Canadian Social Work* for the new volume.

Part Two is entitled “Directories of Agencies”, and this includes information about international agencies, U.S. governmental and voluntary agencies, and Canadian agencies. The appendix lists all the periodicals which are mentioned in the bibliographies at the end of the articles, along with their publishers and addresses. This gives a pretty complete list of periodicals in the social welfare field, but in the directory section, after the name of each agency, the periodicals which the agency publishes are listed, and the prices are also given.

The index provides valuable cross-references for the articles and also other information which can be very useful. For example, under the entry *Chronic Illness* are listed six agencies concerned with the problem, with page references to the appropriate entries in the directory of agencies.

From this description it may be seen that the *Social Work Year Book* is not only to be read but to be used constantly for reference. It is also the ideal, easily available, refresher course in the broad social work field for practitioners of the profession, and an admirable overview for novices, volun-

teers, lay people, and anyone else who wants to know what it is all about.

M.M.K.

MEASURING RESULTS IN SOCIAL CASEWORK, by J. McV. Hunt and Leonard S. Kogan. 79 pp. Price \$1.50.

TESTING RESULTS IN SOCIAL CASEWORK, by J. McV. Hunt, Margaret Blenkner and Leonard S. Kogan. 64 pp. Price \$2.00.
Family Service Association of America, New York, 1950.

These monographs are important contributions to the limited but growing literature on social casework research. They advance research in this field by relying on casework concepts as determined by case workers, and on the judgments of case workers themselves in developing and testing an instrument for measuring *movement*.

Movement for purposes of these studies is "the change that appears in the adaptive efficiency, in the disabling habits and conditions, and in the verbalized attitudes and understanding of an individual client, and/or in his environmental situation between the opening and closing of his case". The goal, therefore, is concentrated on *movement* itself, not on the determinants of movement.

For case workers generally the determinants of movement, especially factors relating to the quality of agency service, may well appear to be more fruitful topics for research. However, in an area where research presents many pitfalls there are distinct advantages in concentrating on the development of a standardized instrument for measuring a variable common to all casework. Refinement of casework research can only come after many basic studies have been carried out.

The authors have faced courageously the difficulties in applying a yard stick to this whole area. They have taken an honest experimental approach, and are fully aware of the limitations of their achievements; they want their work to be tested, criticized and improved upon. Throughout the whole of their research professional workers have been creatively involved. Such involvement is fundamental to new advances in casework research.

The success of any measuring instrument, of course, depends on whether it measures effectively that for which it was designed. No one would contend, least of all the authors, that the testing of results in social casework as measured by the movement scale represents a definitive achievement which could be universally relied upon. But if careful note is taken of what the scale does and does not purport to measure, the success of the authors in applying scientific methods in an intractable area is outstanding.

As the instrument stands today it would require special facilities to apply it as an evaluative technique even in family casework where it was developed. And granting the care with which the authors developed and tested their research, the limitations of their measuring instrument, which they so fully recognize, appear to cast doubt on the positive value to the practising worker. Such dubiousness, in the spirit of the authors' scientific approach, should be a stimulus to additional experiment and appraisal. Both monographs warrant detailed attention.

JOSEPH E. LAYCOCK,

*School of Social Work,
University of Toronto.*

TEACHING AIDS OBTAINABLE FROM DEPARTMENTS OF THE GOVERNMENT OF OTTAWA, by Brian E. Brown. Canadian Citizenship Council, 46 Elgin Street, Ottawa. 23 pp. Price 10 cents.

The title *Teaching Aids* applied to this booklet gives no adequate idea of its usefulness. Certainly teachers and leaders of informal education groups will find it invaluable. But anyone who is interested in government publications, which are not nearly as well known as they ought to be, should have a copy. Books, maps, films, pictures, periodicals and pamphlets are available from some 22 government departments, and they are all listed here, with prices in most cases, and a brief description of each item. A French edition is also available.

POST GRADUATE SCHOLARSHIPS AND FELLOWSHIPS OPEN TO CANADIAN STUDENTS: Reference Paper No. 21, January, 1951. Dominion Bureau of Statistics, Ottawa. Price 25 cents.

This document is a catalogue of scholarships and fellowships open to Canadians for post graduate studies. It indicates in summary fashion the conditions attached to each award, and the address of the awarding agency from which fuller details can be obtained. It does not list awards offered by any university that are not open to the students of other universities, but only awards which will enable students to study at other institutions. Section II lists scholarships and fellowships in the field of the social sciences and social service.

COMING EVENTS OF INTEREST TO COUNCIL MEMBERS

- May 2-4—Annual Meeting of Canadian Welfare Council, King Edward Hotel, Toronto.
May 1-8—Mental Health Week.
May 7-10—Western Regional Conference of Social Work, Winnipeg.
May 11-13—Ontario Recreation Conference, University of Western Ontario, London, Ontario.
May 13-19—National Conference of Social Work, Atlantic City.
May 17-18—Conference of Associations of Children's Aid Societies of Ontario, Royal York Hotel, Toronto.
June 26-29—Maritime Conference on Social Work, Halifax.

SOCIAL WORK STUDY

American and Canadian social workers who are interested in a social welfare study tour in Europe next summer are invited to write to the U.S. Committee of the International Conference of Social Work, 22 West Gay St., Columbus, Ohio, to secure details about the trip being planned. Departure (by air) is tentatively scheduled for July 8, and return (also by air) for August 4. The all-inclusive fee, except for free time, will be in the neighbourhood of \$850.

"Needs of the Aged"

By **ELIZABETH GOVAN**

Reprint of an article in the

Dalhousie Review,

January, 1951

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